

New Worker Orientation Checklist



All employees and dependent contractors operating under your company's safety plan must review the following general areas **on their first day before they start work or when returning to work after an absence of longer than 6 weeks.**

Employee / Contractor Name: _____ Date: _____
Supervisor/H&S rep name: _____ Supervisor/H&S rep contact: _____

Company Policies																					
<input type="checkbox"/> Cover Page - Forest Safety Accord	<input type="checkbox"/> Section 1.2 - Company Health & Safety Program																				
<input type="checkbox"/> Section 2 - Job Roles and Responsibilities -	<input type="checkbox"/> Section 1.3 - Safety Team members-																				
Review of Safety Policies and Procedures																					
<input type="checkbox"/> Section 1.4.1 - Required safety meetings	<input type="checkbox"/> Section 1.4.2 - Hazard / close-call / incident reporting requirements and procedures																				
<input type="checkbox"/> Section 2.4 – Right to refuse work and report unsafe conditions	<input type="checkbox"/> Section 3 - Progressive discipline and violence in the workplace policies																				
<input type="checkbox"/> Sections 4 and 5 - First Aid equipment and procedures	<input type="checkbox"/> Section 11 - Check-in procedures and field communications																				
<input type="checkbox"/> Section 9 - PPE policy and requirements	<input type="checkbox"/> Section 10 and Appendix 2 - Emergency Response Plan (ERP) and procedures																				
<input type="checkbox"/> Section 12 - Field Safety Plans	<input type="checkbox"/> Section 13 - Tailboard Meetings / Vehicle and Machinery Inspections/ Site and Worker Assessments																				
<input type="checkbox"/> Section 7.1 / App. 6 - New Worker Orientations	<input type="checkbox"/> Section 14 - Worksite First Aid Requirements																				
<input type="checkbox"/> Section 15 - WHMIS orientation and location of the Material Safety Data Sheets (MSDS)	<input type="checkbox"/> Section 8 - Records of Training																				
<input type="checkbox"/> Training, certification & qualifications verified by the company (see record of training in P:\Current\Safety\Training) <ul style="list-style-type: none"> <input type="checkbox"/> OFA Level 1 <input type="checkbox"/> Class 5 Drivers License <input type="checkbox"/> Electrofishing <input type="checkbox"/> Swift Water Rescue <input type="checkbox"/> WHMIS <input type="checkbox"/> RPAS Pilot _____ (level) 	<input type="checkbox"/> Sections 17 and 18, Appendix 1 - Applicable hazards and safe work procedures related to work tasks/processes (Check those reviewed) <table border="1"> <tbody> <tr> <td><input type="checkbox"/> Aquatic</td> <td><input type="checkbox"/> Working in remote locations</td> </tr> <tr> <td><input type="checkbox"/> Terrestrial</td> <td><input type="checkbox"/> Working alone</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Electrofishing</td> </tr> <tr> <td><input type="checkbox"/> Transportation</td> <td><input type="checkbox"/> Snorkelling</td> </tr> <tr> <td><input type="checkbox"/> Bears</td> <td><input type="checkbox"/> Chainsaw operation</td> </tr> <tr> <td><input type="checkbox"/> Driving</td> <td><input type="checkbox"/> Housekeeping</td> </tr> <tr> <td><input type="checkbox"/> Working in and around water</td> <td><input type="checkbox"/> Preventing Musculoskeletal and Repetitive strain</td> </tr> <tr> <td><input type="checkbox"/> Working in wildlife habitat</td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>	<input type="checkbox"/> Aquatic	<input type="checkbox"/> Working in remote locations	<input type="checkbox"/> Terrestrial	<input type="checkbox"/> Working alone	<input type="checkbox"/> Construction	<input type="checkbox"/> Electrofishing	<input type="checkbox"/> Transportation	<input type="checkbox"/> Snorkelling	<input type="checkbox"/> Bears	<input type="checkbox"/> Chainsaw operation	<input type="checkbox"/> Driving	<input type="checkbox"/> Housekeeping	<input type="checkbox"/> Working in and around water	<input type="checkbox"/> Preventing Musculoskeletal and Repetitive strain	<input type="checkbox"/> Working in wildlife habitat					
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Signature of Employee / Contractor

Signature of Supervisor / Trainer